

Application Data Sheet

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: METHOD AND APPARATUS FOR REDUCTION
OF GAS BUBBLE FORMATION DUE TO GAS
DIFFUSION THROUGH LIQUIDS CONTAINED
IN PORES

Attorney Docket Number:: PMI-23

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 3

Small Entity?:: Yes

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Correspondence Information

Correspondence Customer Number:: 020808

Phone Number:: 607-256-2000

Fax Number:: 607-256-3628

E-Mail address:: aquilla@bpmlegal.com

Representative Information

Representative Customer Number:: 020808

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date:

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Porous Materials, Inc.

Street of mailing address:: 83 Brown Road

City of mailing address:: Ithaca

State or Province of mailing
address:: New York

Country of mailing address:: USA

Postal or Zip Code of mailing
address:: 14850

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Krishna
Middle Name::	M.
Family Name::	Gupta
Name Suffix::	
City of Residence::	Ithaca
State or Province of Residence::	NY
Country of Residence::	USA
Street of mailing address::	12 Grandview Drive
City of mailing address::	Ithaca
State or Province of mailing Address::	NY
Country of mailing address::	USA
Postal or Zip Code of mailing Address::	14850

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Valeriu
Middle Name::	
Family Name::	Smiricinski
Name Suffix::	
City of Residence::	Ithaca
State or Province of Residence::	NY
Country of Residence::	Ithaca
Street of mailing address::	316 Highland Rd. Apt B204
City of mailing address::	Ithaca
State or Province of mailing	
Address::	NY
Country of mailing address::	USA
Postal or Zip Code of mailing	
Address::	14850